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Christina Caudle	(Depositor's name)
/Christina Caudle/	(Signature)
December 29, 2011	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.		
09/558,755	04/21/2000	Devin F. Hosea	60136.0097USU1	9034		
TITLE OF INVENTION: METHOD AND SYSTEM FOR WEB USER PROFILING AND SELECTIVE CONTENT DELIVERY						

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	NO	\$1740	S0	\$0	\$1740	12/29/2011		
EXAM	IINER	ART UNIT	CLASS-SUBCLASS					
BOYCE,	ANDRE D	3623	705-007330					
I. Change of correspondence address or indication of "Fee Address" (37 CTR 1,563). Change of correspondence address (or Change of Correspondence Address form PTOSB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTOSB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.		2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered patent attorneys or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.		& Gould				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)								
FLEASE NOTE: UII	iess an assignee is ident	iffed below, no assignee	uata wili appear on the p	atent. It an assignee is it	PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for			

recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNED

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Cox Communications, Inc.	Atlanta, Georgia
Please check the appropriate assignee category or categories (will not b	pe printed on the patent): 🔲 Individual 💆 Corporation or other private group entity 🚨 Government
4a. The following fee(s) are submitted: Suse Fee	4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 1.3 = 2725. Genelose an extra copy of this form).
 Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. 	☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).
NOTE: The Issue Fee and Publication Fee (if required) will not be acceinterest as shown by the records of the United States Patent and Traden	epted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in nark Office.

Date December 29, 2011 Authorized Signature /David W. Lynch/ Typed or printed name ___ David W. Lynch 36.204 Registration No. This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and

submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time your require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer. U.S. Patert and Trademark Officer. U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 2231-450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 2231-450.

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